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Promotion and protection of all human rights, civil, political, economic, social and cultural rights, including the right to development

Burkina Faso,* Colombia,* New Zealand,* Thailand:* draft resolution

33/... Preventable maternal mortality and morbidity and human rights

The Human Rights Council,

Recognizing that preventing maternal mortality and morbidity is a human rights priority for all States, and reaffirming that all human rights are universal, indivisible, interrelated, interdependent and mutually reinforcing,

Recalling its previous resolutions on preventable maternal mortality and morbidity and human rights,

Reaffirming the Beijing Declaration and Platform for Action, the Programme of Action of the International Conference on Population and Development and its review conferences, including the outcome document of the 15-year review of the Programme of Action contained in Commission on Population and Development resolution 2009/1 of 3 April 2009, and their subsequent reviews, reaffirming also the resolutions and agreed conclusions of the Commission on the Status of Women, and noting the adoption by the Committee on Economic, Social and Cultural Rights of its general comment No. 22 (2016) on the right to sexual and reproductive health, and the adoption by the Committee on the Rights of Persons with Disabilities of its general comment No. 3 (2016) on women and girls with disabilities,

Welcoming the efforts of the World Health Organization to prevent maternal mortality and morbidity, taking note of World Health Assembly resolution 69.2 and report A68/16, and recalling the global commitment to the reduction of maternal mortality and to universal access to reproductive health,

Reaffirming the 2030 Agenda for Sustainable Development,[1] and its call to take the bold and transformative steps urgently needed to shift the world on to a sustainable and

* State not a member of the Human Rights Council.

[1] General Assembly resolution 70/1.

resilient path, to ensure that no one will be left behind and to make efforts to reach the furthest behind first,

Taking note of the Secretary-General's renewed Global Strategy on Women's, Children's and Adolescents' Health, and recognizing the important role it may play in the realization of sexual and reproductive health and rights and reducing preventable maternal mortality and morbidity,

Recognizing the importance of strengthening coordination between all relevant United Nations agencies in reducing preventable maternal mortality and morbidity, including by developing linkages between the technical guidance prepared by the Office of the United Nations High Commissioner for Human Rights[2] and the Global Strategy on Women's, Children's and Adolescents' Health, including the operational framework[3] and Independent Accountability Panel, and the review processes of the Sustainable Development Goals,

Stressing that reducing maternal mortality and morbidity in accordance with human rights obligations and commitments will require efforts across the 2030 Agenda for Sustainable Development, including Sustainable Development Goals 1, 3, 4, 5, 10, 17 and targets 16.1, 16.3 and 16.8, and other possible interlinkages among the Goals, and the Addis Ababa Action Agenda of the Third International Conference on Financing for Development,[4] which is an integral part of the 2030 Agenda, supports and complements it and helps to contextualize its means of implementation targets with concrete policies and actions,

Recognizing the positive contribution that the work of the Human Rights Council, including its universal periodic review mechanism, may make to national, regional and global review of the Sustainable Development Goals and follow-up efforts in relation to preventable maternal mortality and morbidity,

Reaffirming that States parties to the International Covenant on Economic, Social and Cultural Rights have an obligation to respect, protect and fulfil the right to sexual and reproductive health as an integral part of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health,

Recognizing that sexual and reproductive health and rights are integral to the progressive realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, and that comprehensive sexual and reproductive health care and services contain the interrelated and essential elements of availability, accessibility, affordability, acceptability and quality, on the basis of non-discrimination and formal and substantive equality, while including the need to address intersectional and multiple forms of discrimination,

Emphasizing that realizing the rights of women and girls, which are equal to those of men and boys, in the context of health and safety requires the provision of differential services, treatment and medicines in accordance with their specific needs throughout their life cycle, which are distinctively different to those of men, and the elimination of the social and economic barriers that may make them more vulnerable;

Reaffirming that the human rights of women include a woman's right to have control over, and to decide freely and responsibly on, matters related to her sexuality, including sexual and reproductive health, free of coercion, discrimination and violence, and that equal

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[2] A/HRC/21/22 and Corr. 1 and 2.

[3] World Health Assembly resolution WHA69.2.

[4] General Assembly resolution 69/313.

relationships between women and men in matters of sexual relations and reproduction, including full respect for the integrity of the person, require mutual respect, consent and shared responsibility for sexual behaviour and its consequences,

Recognizing the importance of identifying, within the framework of the Sustainable Development Goals, appropriate national indicators in reducing maternal mortality and morbidity in accordance with relevant human rights obligations and commitments,

Bearing in mind the need to take measures, such as collecting disaggregated data and conducting surveys, to ensure that all marginalized groups, especially those experiencing multiple and intersecting forms of discrimination, are accounted for in official statistics,

Deeply concerned that, despite the impressive reductions in maternal mortality rates achieved since 1990, according to the World Health Organization, in 2015, there were an estimated 303,000 maternal deaths of women and girls, which were largely preventable, and that many more women and girls suffer serious and sometimes lifelong injuries, which have severe consequences for their enjoyment of their human rights and their overall well-being,

Affirming that a significant reason for the high rates of maternal mortality and morbidity in developing countries is the lack of much-needed development and infrastructure in certain areas,

Recognizing that there are large disparities in maternal mortality and morbidity rates between countries, but also within countries, and between women with a high and a low income, and between those living in rural as against urban areas, and noting with concern that the risk of maternal mortality is highest for adolescent girls under 15 years of age, and that complications in pregnancy and childbirth is a leading cause of death among adolescent girls in developing countries, recognizing also that the risk of maternal mortality and morbidity is exacerbated in conflict and humanitarian crisis situations,

Deeply concerned that there are continuing violations of the right to sexual and reproductive health, which have a negative impact on rates of maternal mortality and morbidity, and that the full enjoyment of the right to sexual and reproductive health remains a distant goal for many women and girls throughout the world,

Regretting the multitude of factors that can lead to maternal mortality and morbidity, including lack of accessible and appropriate health care and services, information and education, lack of access to emergency obstetric care, poverty, all types of malnutrition, harmful practices, including child, early and forced marriage and female genital mutilation, and denial of contraception and safe abortion, discrimination against women, gender inequality and gender-based stereotypes,

Convinced that greater political will and commitment, international cooperation and technical assistance at all levels are urgently required to reduce the unacceptably high global rate of preventable maternal mortality and morbidity, and that the integration of a human rights-based approach can contribute positively to the common goal of reducing that rate,

Recognizing the need for enhanced cooperation aimed at strengthening capacities and promoting adequate transfer of technology on mutually agreed terms to developing countries in order to prevent maternal mortality and morbidity in those countries,

Acknowledging that the failure to prevent maternal mortality and morbidity is one of the most significant barriers to the empowerment of women and girls in all aspects of life, the full enjoyment of their human rights, their ability to reach their full potential and to sustainable development in general,

1. *Urges* all States to renew their political commitment to eliminate preventable maternal mortality and morbidity at the local, national, regional and international levels due to primary and secondary causes, and to strengthen their efforts to address multiple and intersecting inequalities and to remove all barriers to access to sexual and reproductive health facilities, services, goods and information, and education, ensure the full and effective implementation of their human rights obligations, and their commitments as addressed in the Beijing Declaration and Platform for Action, the Programme of Action of the International Conference on Population and Development and the outcome documents of the review processes, including the commitments relating to sexual and reproductive health and reproductive rights, the 2030 Agenda for Sustainable Development and the Sustainable Development Goals, considering the Goals on improving maternal health and promoting gender equality and empowering women, and other interlinked Goals, by ensuring universal access to quality maternity, sexual and reproductive health services, including through the allocation of domestic resources to health systems and the provision of the necessary information and services in relation to the right to the highest attainable standard of physical and mental health, including the sexual and reproductive health of women and girls;

2. *Requests* States and other relevant actors to give renewed emphasis to maternal mortality and morbidity initiatives in their development partnerships and cooperation arrangements, including by honouring existing commitments and considering new ones, and to the exchange of effective practices and technical assistance to strengthen national capacities, and to integrate a human rights-based perspective into such initiatives, addressing the impact that discrimination against women has on maternal mortality and morbidity;

3. *Urges* States and other relevant stakeholders, including national human rights institutions and non-governmental organizations, to take action at all levels, utilizing a comprehensive human rights-based approach to address the interlinked causes of maternal mortality and morbidity, such as gender inequalities, all forms of discrimination and violence against women, early childbearing, early marriage, poverty, all types of malnutrition, harmful practices such as female genital mutilation, lack of accessible and appropriate health care services for all, information and education, and to pay particular attention to eliminating all forms of violence against women and girls, especially adolescent girls, while ensuring the meaningful and effective participation of women and girls in the relevant processes;

4. *Urges* States to take steps to ensure that laws, policies and practices respect women's equal right to decide autonomously in matters regarding their own lives and health, including their bodies, by repealing discriminatory laws relating to third-party authorization for health information and services, and combating gender stereotypes and behaviours that discriminate against them;

5. *Welcomes* the work of the Office of the United Nations High Commissioner for Human Rights in the follow-up on the application of the technical guidance on the application of a human rights-based approach to the implementation of policies and programmes to reduce preventable maternal mortality and morbidity[1] has been applied to States and other relevant actors, and calls upon States and encourages stakeholders to consider the adoption of the recommendations contained therein;

6. *Calls upon* all relevant actors, including Governments, regional organizations, relevant United Nations agencies, national human rights institutions and civil

[1] See A/HRC/33/24

society organizations to continue to disseminate the technical guidance and to apply it, as appropriate, when designing, implementing and reviewing policies and evaluating programmes to reduce preventable maternal mortality and morbidity, ensuring the meaningful participation of women and girls in all decisions that affect them;

7. *Calls upon* all relevant United Nations agencies, funds and programmes, within their respective mandates, to provide technical cooperation and assistance to States, upon their request, to support the implementation of the technical guidance and other related commitments regarding maternal mortality and morbidity;

8. *Calls upon* States to consider using general comment No. 22 (2016) of the Committee on Economic, Social and Cultural Rights as a point of reference in the implementation of the Sustainable Development Goals;

9. *Also calls upon* States to ensure that indicators adopted at the national level to monitor progress and impact are aligned with human rights obligations and commitments, including in the context of the implementation of the 2030 Agenda, to complement indicator analysis with human rights reporting;

10. *Further calls upon* States to assess existing accountability mechanisms for women's sexual and reproductive health and rights in relation to maternal mortality and morbidity, including the monitoring of inequities, while ensuring access to justice for women and girls, and to build accountability into interventions and strategies, to monitor the functioning and effectiveness of those mechanisms and processes and to take remedial action to ensure they are responsive to human rights;

11. *Encourages* the High Commissioner to promote awareness and utilization of the technical guidance by all relevant actors in order to accelerate the realization of the rights of women and girls and the achievement of Sustainable Development Goal target 3.1, considering its possible interlinkages with other Sustainable Development Goals;

12. *Requests* the High Commissioner to bring to the attention of the High-level working group on women's, children's and adolescents' health the technical guidance, and to encourage close integration of these issues in the development of the report of the high-level working group;

13. *Decides* to convene, at its thirty-fourth session, a panel discussion on the linkages between Sustainable Development Goals 3 and 5 in relation to preventable maternal mortality and morbidity and sexual and reproductive health and rights;

14. *Requests* the Office of the High Commissioner to prepare a report on the panel discussion in the form of a summary;

15. *Requests* the High Commissioner to prepare, from within existing resources, in consultation with States, United Nations agencies and all other relevant stakeholders, a follow-up report on how the technical guidance has been applied by States and other relevant actors, including the United Nations Population Fund, the United Nations Development Programme, UN-Women, and the World Health Organization, and to present it to the Human Rights Council at its thirty-ninth session;

16. *Decides* to remain seized of the matter.